

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	KW		9/28/99

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date	Claim	Date	Claim	Date
Final	Original	Final	Original	Final	Original
10	3/10/00	10	3/10/00	10	3/10/00
11	12/21/00	11	12/21/00	11	12/21/00
12	3/12/00	12	3/12/00	12	3/12/00
13	10/27/00	13	10/27/00	13	10/27/00
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If more than 150 claims or 10 actions  
staple additional sheet here

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